State of Wisconsin Department of Natural Resources PO Box 7921, Madison WI 53707-7921 dnr.wi.gov Document Number (Finance Use Only) TL370												TRAVEL VOUCHER (Conservation Congress Only) Form 9300-139C (Rev. 10/15)							
Last Name First Name							MI				Justif	ication of Ex	ception	s:					
Home Add	ress																		
City State ZIF						ZIP Code Phone Number					1								
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MM / DD	Purpose of Travel		Departure	Destination		Departure	Return		Miles	Rate	Amount	Direct Billed	morn.	noon	Even.	Item:	Amount:	Total for Day	
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-				l		l	Total	s											
Financ	e Use Only	Aud	ited by ====			OSCR (OWCR	Date			Ot	her Approva	s/Date	Audite	d Finan	ce ===>	Date		
Object Cod	le 2165 PC Busin	ess Unit	Project ID		ACTV		Source Type	Cat	tegory	Subca ID	tegory	GL Business Un	Budget it Ref	Fund	APPR	Departme	nt ID A	Amount	
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Wisconsin incurred by	on I'S STATEMEN statutes and re me personally to me by the	elated tra / in the p	avel guideline performance o	s and ir of my of	nstructi ficial d	ions or perti luties and n	nent colle	ective	e barga	ainina a	agreeme	nts. This cla	im repre	sents rea	sonable	and actua	Lexpenses	necessarily	
	s Signature:													Date	Signed				
Supervisor collective b	r's Attestation: pargaining agre	I certify ements.	that I have re to the best o	viewed f mv kn	this tra	avel claim a	nd find it t	to be	e reaso	nable,	proper,	and in confo	rmity with	n applical	ble statu	tes, travel	guidelines, a	and/or	
	collective bargaining agreements, to the best of my knowledge. Supervisor's Signature:													Date	Date Signed				
Audited pu	rsuant to Chap shown above.	ter 16 o Material	f the Wiscons s and/or servi	in Statu	utes an	nd allowed in certified as h	n accorda naving bee	nce en re	with the	e prov l or de	isions of livered.	Chapter 20	as showr	n above.	Certified	d to the Sta	ite Treasure	r payable	

Secretary, Wisconsin Department of Natural Resources